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PTO/SB-01 (12-97)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	8540 (GDMD)
	First Named Inventor	Alain Bouchard
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence or post office address and citizenship are as stated below next to my name.

I believe I am the original and sole inventor of my invention as listed below, and I sign as first and joint inventor of other names are listed below of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TECHNIQUE FOR PRINTING A COLOR IMAGE

the specification of which is attached hereto ☒ OR ☐ was filed on MM/DD/YYYY as an International Application for a PCT International Application Number _____ and was amended on MM/DD/YYYY as amended.

I hereby state that I have reviewed and understand the contents of the above specification and claim, and I am not aware of any amendment or change of substance to the above.

I acknowledge the duty to disclose information which is material to patentability as required by 37 CFR 1.64.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) of any foreign application(s) for patent or invention certificate or revival of any PCT international application(s) which is/are filed in at least one country other than the United States of America listed below and have also identified below by checking the box any foreign application for patent or invention certificate or PCT international application having a filing date before that of the application in which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
None	None		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional prior foreign application numbers are listed on a separate priority data sheet PTO/SB-025 attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
None	None

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB-025 attached hereto.

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Figure 1. Study area.

Print name, type and plus sign in the box below → ☐ +

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet <small>Supplemental Sheet</small>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name (or Surname)			
Anemarie				DeYoung			
Inventor's Signature						Date	4/17/02
Residence: City	Lexington	State	MA	Country	US	Citizenship	US
Post Office Address	6 Raymond Street						
Post Office Address	Same						
City	Lexington	State	MA	ZIP	02420	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name (or Surname)			
Stephen J.				Teller			
Inventor's Signature						Date	4/17/02
Residence: City	Arlington	State	MA	Country	US	Citizenship	UK
Post Office Address	40 College Avenue						
Post Office Address	Same						
City	Arlington	State	MA	ZIP	02474	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name (or Surname)			
William T.				Vetterling			
Inventor's Signature						Date	2/17/2002
Residence: City	Lexington	State	MA	Country	US	Citizenship	US
Post Office Address	35 Turning Mill Road						
Post Office Address	Same						
City	Lexington	State	MA	ZIP	02420	Country	US

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